

North Carolina Division of Motor Vehicles
SCHOOL BUS AND TRAFFIC SAFETY SECTION

APPLICATION TO REGISTER A BUSINESS OPERATING UNDER AN ASSUMED NAME

STATE OF NORTH CAROLINA, County of,

I/we do hereby certify that the business of operating a private commercial driver training school conducted at

in the county of _____ State of North
Carolina, under the name and style of is owned by me/us; and that my/our full name(s) and post office address(es) is/are as
follows:

NAME

POST OFFICE ADDRESS

Witness my/our hand(s) and seal(s), this _____ day of _____, A.D. 20

_____(SEAL)

_____(SEAL)

_____(SEAL)

_____(SEAL)

_____(SEAL)

_____(SEAL)

STATE OF NORTH CAROLINA County of

I, _____

In and for the above named State and County, do hereby certify that this day personally appeared before me

and acknowledged _____ due execution of the foregoing certificate.

Witness my hand and _____ seal this _____ day of _____, A.D. 20